

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIAL S	ID NO.	DATE
FEE DETERMINATION	UT	67607	9/29/99
O.I.P.E. CLASSIFIER		10/4	
FORMALITY REVIEW	WN	67679	10-13-99

1-4-99

INDEX OF CLAIMS

✓ ..... ejected      N ..... Non-elected  
 = ..... lowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

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If more than 50 claims or 10 actions  
 staple additional sheet here